

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/554,374		Filing Date 16 November, 2006		<input type="checkbox"/> To be Mailed					
				Applicant(s) GETTS ET AL.						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 07/21/2008		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1					51					
2				1				52					
3				1				53					
4				1				54					
5				1				55					
6				1				56					
7				1				57					
8				1				58					
9				1				59					
10				1				60					
11				1				61					
12				2				62					
13				2				63					
14				1				64					
15				1				65					
16				1				66					
17				1				67					
18				1				68					
19				1				69					
20				1				70					
21				1				71					
22				1				72					
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24				1				74					
25				1				75					
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29				1				79					
30				1				80					
31			1					81					
32			1					82					
33			1					83					
34			1					84					
35			1					85					
36			---	---				86					
37			1					87					
38			1					88					
39			1					89					
40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
Total Indep			3					Total Indep					
Total Depend				37				Total Depend					
Total Claims			40					Total Claims					

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